PTO/SB/21 (09-04)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/797,485	
Filing Date	March 9, 2004	
First Named Inventor	SAADAT, VAHID	
Art Unit	3731	
Examiner Name	Unassigned	
Attorney Docket Number	021496-000130US	

Total Number of Pa	ages in This Submission			02	1490-00013003
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Application Rep	ssing Parts/ Incomplete oly to Missing Parts er 37 CFR 1.52 or 1.53		Account		
	SIGNA	TURE	OF APPLICANT, A	TTORNEY, (OR AGENT
Signature Printed name	Townsend and Towns James M. Heslin	send ar	nd Crew LLP		
Date	2 10 222	·		Reg. No.	20.544
23.0	September <u>19</u> , 200	15			29,541
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Date

September <u>/ 9</u>, 2005

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Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on 9-19-2005

TOWNSEND and TOWNSEND and CREW LLP

Jennifer O'Brien

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

VAHID SAADAT et al.

Application No.: 10/797,485

Filed: March 9, 2004

For: ENDOLUMINAL TOOL DEPLOYMENT SYSTEM

Examiner: Unassigned

Art Unit: 3731

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT UNDER 37

CFR §1.97 and §1.98

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The reference cited on attached form PTO/SB/08A and PTO/SB/08B is being called to the attention of the Examiner. A copy of the reference is enclosed. It is respectfully requested that the cited reference be expressly considered during the prosecution of this application, and the reference be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

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representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that <u>no fee is required</u> for submission of this statement.

However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

James M. Heslin Reg. No. 29,541

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

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Complete if Known				
Application Number 10/797,485				
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Examiner Name	Unassigned			
Attomey Docket Number	021496-000130US			

U.S. PATENT DOCUMENTS+					
		Document Number			
Examiner Initials*	Cite No. ¹	Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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FOREIGN PATENT DOCUMENTS								
Examiner Cite		Foreign Patent Document			Dublication Data	Name of Patentee or	Pages, Columns, Lines, Where Relevant	
Initials* No.1	Country Code ³	Number ⁴	Kind Code ⁸ (<i>if known</i>)	Publication Date MM-DD-YYYY	Applicant of Cited Document	Passages or Relevant Figures Appear	Ţ ⁶	
	1	wo	2005/05351	7 A1	06-16-2005	Olympus Corp		⊠

NON PATENT LITERATURE DOCUMENTS						
Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²			

Examiner Date Considered	
Signature Considered	

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.